

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER			-14-01
FORMALITY REVIEW			
RESPONSE FORMALITY REVIEW	27		9-22-01

INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral) ... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

Claim	Final	Original	Date
1	✓	✓	7-15-05
2	✓	✓	7-15-05
3	✓	✓	7-15-05
4	✓	✓	7-15-05
5	✓	✓	7-15-05
6	✓	✓	7-15-05
7	✓	✓	7-15-05
8	✓	✓	7-15-05
9	✓	✓	7-15-05
10	✓	✓	7-15-05
11	✓	✓	7-15-05
12	✓	✓	7-15-05
13	✓	✓	7-15-05
14	✓	✓	7-15-05
15	✓	✓	7-15-05
16	✓	✓	7-15-05
17	✓	✓	7-15-05
18	✓	✓	7-15-05
19	✓	✓	7-15-05
20	✓	✓	7-15-05
21	✓	✓	7-15-05
22	✓	✓	7-15-05
23	✓	✓	7-15-05
24	✓	✓	7-15-05
25	✓	✓	7-15-05
26	✓	✓	7-15-05
27	✓	✓	7-15-05
28	✓	✓	7-15-05
29	✓	✓	7-15-05
30	✓	✓	7-15-05
31	✓	✓	7-15-05
32	✓	✓	7-15-05
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42	✓	✓	7-15-05
43	✓	✓	7-15-05
44	✓	✓	7-15-05
45	✓	✓	7-15-05
46	✓	✓	7-15-05
47	✓	✓	7-15-05
48	✓	✓	7-15-05
49	✓	✓	7-15-05
50	✓	✓	7-15-05

Claim	Final	Original	Date
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Claim	Final	Original	Date
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Best Available Copy

If more than 150 claims or 10 actions  
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